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BIBDATASHEET

CONFIRMATION NO. 34

Bib Data Sheet

SERIAL NUMBER 09/843,687	FILING DATE 04/30/2001 RULE	CLASS 716	GROUP ART UNIT 2825	ATTORNEY DOCKE NO. 43889-937
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APPLICANTS

Sadami Takeoka, Osaka, JAPAN;

Takahiro Ichinomiya, Osaka, JAPAN;
Akira Motohara, Hyogo, JAPAN;

** CONTINUING DATA *****

This application is a CON of 08/803,145 02/19/1997 PAT 6,282,506

** FOREIGN APPLICATIONS *****

JAPAN 8-032152 02/20/1996

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/15/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENCE
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____	JAPAN	DRAWING 26	CLAIMS 11	CLAIMS 10

ADDRESS

McDERMOTT, WILL & EMERY

600 13th Street, N.W.

Washington , DC
20005-3096

TITLE

Method of edsigning semiconductor integrated circuit

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
RECEIVED 1270		



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CONFIRMATION NO. 3437

Bib Data Sheet

SERIAL NUMBER 09/843,687	FILING DATE 04/30/2001 RULE	CLASS 364 703	GROUP ART UNIT 2123	ATTORNEY DOCKET NO. 43889-937
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APPLICANTS

Sadami Takeoka, Osaka, JAPAN;
 Takahiro Ichinomiya, Osaka, JAPAN;
 Akira Motohara, Hyogo, JAPAN;

**** CONTINUING DATA *******

THIS APPLICATION IS A CON OF 08/803,145 02/19/1997

**** FOREIGN APPLICATIONS *******

JAPAN 8-032152 02/20/1996

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 05/15/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 26	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 10
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

McDERMOTT, WILL & EMERY
 600 13th Street, N.W.
 Washington ,DC 20005-3096

TITLE

Method of edesigning semiconductor integrated circuit

FILING FEE RECEIVED 1270	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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